

## PART B - FEE(S) TRANSMITTAL

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4506 7590 08/14/2006

RENNER, OTTO, BOISSELLE & SKLAR, LLP (AMDS)  
1621 EUCLID AVE - 19TH FLOOR  
CLEVELAND, OH 44115-2191

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EFS

### Certificate of Mailing or Transmission

I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.

Jason A. Worgull	(Depositor's name)
<i>Jason A. Worgull</i>	(Signature)
August 23, 2006	(Date)

APPLICATION NO	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO	CONFIRMATION NO
09/515,348	02/29/2000	Christopher A. Spence	F0039	2076

TITLE OF INVENTION: METHOD FOR EVALUATION OF RETICLE IMAGE USING AERIAL IMAGE SIMULATOR

APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1400	\$0	\$0	\$1400	11/14/2006

EXAMINER	ART UNIT	CLASS-SUBCLASS
WERNER, BRIAN P	2624	382-144000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

- Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.  
 "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. **Use of a Customer Number is required.**

2. For printing on the patent front page, list

- (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,  
(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1 Renner, Otto,  
Boisselle and Sklar,  
LLP  
3 \_\_\_\_\_

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Advanced Micro Devices, Inc.

Sunnyvale, CA

Please check the appropriate assignee category or categories (will not be printed on the patent):  Individual  Corporation or other private group entity  Government

4a. The following fee(s) are submitted:

- Issue Fee  
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 The Director is hereby authorized to charge the required fee, any deficiency, or credit any overpayment, to Deposit Account Number 18-0988 (enclose an extra copy of this form).

5. Change in Entity Status (from status indicated above)

- a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.  b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

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Authorized Signature

*Jason A. Worgull*

Date 8-23-06

Typed or printed name

Jason A. Worgull

Registration No. 48,044

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